Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

1-81. (Cancelled)

- 82. (New) A method for selecting a lung cancer patient predicted to benefit from therapeutic administration of an EGFR inhibitor selected from the group consisting of gefitinib and erlotinib comprising:
 - a) determining the level of expression of an E-Cadherin polynucleotide in a sample of lung cancer tumor cells from a lung cancer patient;
 - b) comparing the level of expression of the E-Cadherein polynucleotide detected in cells from the cancer patient sample to a level of expression of the E-cadherin polynucleotide that has been correlated in lung cancer cells with sensitivity or resistance to gefitinib or erlotinib; and
 - c) selecting the lung cancer patient as being predicted to benefit from therapeutic administration of gefitinib or erlotinib if the expression level of the E-cadherin polynucleotide in the patient's tumor cells is statistically more similar to the expression level of the E-cadherin polynucleotide that has been correlated with sensitivity to gefitinib or erlotinib than to resistance to gefitinib or erlotinib.
- 83. (New) The method of Claim 82, comprising detecting expression of the E-cadherin polynucleotide represented by SEQ ID NO:3.
- 84. (New) The method of Claim 82, wherein the EGFR inhibitor is gefitinib.
- 85. (New) The method of Claim 82, wherein the EGFR inhibitor is erlotinib.
- 86. (New) The method of claim 82, wherein the patient is predicted to benefit from therapeutic administration of the EGFR inhibitor selected from the group consisting of gefitinib

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and erlotinib if the expression level of the polynucleotide in the patient's tumor cells is regulated in the same direction and from about 50% to about 100% of the expression level of the polynucleotide that has been correlated with sensitivity to the EGFR inhibitor selected from the group consisting of gefitinib and erlotinib.

87. (New) The method of claim 82, wherein the patient is predicted to benefit from therapeutic administration of the EGFR inhibitor selected from the group consisting of gefitinib and erlotinib if the expression level of the polynucleotide in the patient's tumor cells is regulated in the same direction and from about 75% to about 100% of the expression level of the polynucleotide that has been correlated with sensitivity to the EGFR inhibitor selected from the group consisting of gefitinib and erlotinib.